

## PART B - FEE(S) TRANSMITTAL

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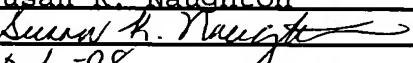
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

116 7590 08/07/2008  
**PEARNE & GORDON LLP**  
1801 EAST 9TH STREET  
SUITE 1200  
CLEVELAND, OH 44114-3108



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Susan K. Naughton	(Depositor's name)
	
10-6-08	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/540,764 11/14/2005 Filippo Bastia

TITLE OF INVENTION: RETRCTOR FOR OPERATIONS ON THE ARTERIA HAEMOROIDALIS

BUG8-38328 10/08/2008 MGEBREH2 00000065 1054076411

755.00 OP  
300.00 OP

81 FC:2501  
82 FC:1584

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	<u>\$720 755</u>	\$300	\$0	<u>\$1020 1055</u>	11/07/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
KASZTEJNA, MATTHEW JOHN	3739	600-184000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Pearne & Gordon LLP  
2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

THD S.P.A.

Correggio, Italy

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
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A check is enclosed.  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16-0820 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date 10-3-08

Typed or printed name John P. Murtough

Registration No. 34226

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